

**WISCONSIN DEPARTMENT OF PUBLIC INSTRUCTION**  
**Community Nutrition Programs**  
**Child and Adult Care Food Program**

**Guidance Memorandum 12C:** For Child and Adult Care Food Program Sponsoring Organizations and Independent Centers (Child Care Component)

Topic: Meal Pattern Requirements—Infants (Birth through 11 Months) and Children (Ages 1 to 12 and older participants in certain programs)

Date: February 2010

The Child and Adult Care Food Program (CACFP) will reimburse a child care institution for a maximum of two meals (breakfast, lunch, or supper) and one snack per day per child **or** two snacks and one meal per day per child, served to enrolled children in child care institutions participating in the CACFP.

Outside of school hours care centers may be reimbursed for breakfast before school starts and a snack and supper after the school day ends (two meals and one snack). Lunch may be approved during weekends, school vacations, and holidays provided that no more than two meals and one snack **or** two snacks and one meal are claimed per day for any one child.

Emergency shelters may receive reimbursement for up to three meals (breakfast, lunch, and supper) **or** two meals and one snack for each resident child each day.

At-risk afterschool care centers may claim up to one meal and one snack per child per day for reimbursement during the regular school year. Only a supper and/or a snack may be claimed for reimbursement on regular school days. Any one meal (breakfast, lunch, or supper) and/or a snack may be claimed during weekends and holidays.

Written, dated menus must be maintained for all meals served to children ages 1 through 12 and older participants served in emergency shelters and at-risk afterschool care centers. Meals must meet the CACFP minimum meal pattern requirements for infants and children listed on the following pages. The meal patterns are based on research related to the individual needs of infants and children at specific ages. Youth ages 13 through 18 in emergency shelters and at-risk afterschool care centers must be served at least the minimum portion sizes specified for children ages 6 through 12, although USDA recommends that portion sizes larger than those for the 6 to 12 year old age group be given to adolescents.

In order to be claimed for reimbursement, meals and snacks must be offered to and consumed by the children while in the agency's care, either on-site or during outings. Meals and snacks given to the children to eat when they are not under the supervision of the center cannot be claimed for reimbursement.

**The meal pattern for infants** contains iron-fortified infant formula or breast milk, iron-fortified infant cereal, and other foods as shown in the attached *CACFP Infant Meal Pattern*. Required guidelines for infant meals include:

**Definitions from the United States Department of Agriculture (USDA)**

- Infant—A baby from birth through 11 months (any child less than one year of age).
- Infant Formula—Any iron-fortified infant formula, including soy-based, intended for dietary use solely as a food for normal, healthy infants served in liquid state according to manufacturer's recommended dilution. Infant formula labeled *low-iron* or those specifically formulated for infants with inborn errors of metabolism or digestive or absorptive problems do not meet the infant meal pattern requirement. A medical statement is required in order for the center to serve/claim reimbursement for infant formulas that do not meet this definition.
- Infant Cereal—Any iron-fortified dry cereal specially formulated for and generally recognized as cereal for infants that is routinely mixed with breast milk or iron-fortified infant formula prior to consumption.
- Developmentally Ready—An infant's developmental readiness determines which foods should be fed, what texture the foods should be, and which feeding styles to use. All infants develop at their own rate. Although age and size often correspond with developmental readiness, these should not be used as sole considerations for deciding what and how to feed infants. It is important to be aware of infants rapidly developing mouth patterns and hand and body control so you know the appropriate food and texture to serve them and the appropriate feeding style to use at each stage of their development. On the Infant Meal Pattern for ages 4 through 11 months, you will see foods listed under the category *When Developmentally Ready*. If an infant is developmentally ready, you must offer these foods to the infant.

**Responsibilities of Child Care Centers**—All agencies participating in the Child and Adult Care Food Program must purchase and provide all the infant foods appropriate for the age of the infant according to the Infant Meal Pattern. This includes at least one iron-fortified infant formula which meets the definition of infant formula. It is recommended to select an infant formula that satisfies the needs of one or more of the infants in care.

**Parent Providing Infant Formula/Breast Milk**—The decision whether to breastfeed an infant or which type of infant formula is best for the infant is one for the infant's doctor and parent/guardian to make together. Therefore, parents or guardians may elect to decline the offered infant formula and supply their own iron-fortified formula or breast milk. This must be documented on the *Infant Meal Notification*.

**Infant Meal Notification**—The attached *Infant Meal Notification* lets the parent/guardian know the specific brand of iron-fortified infant formula purchased by the center. It also provides official documentation of the parent's/guardian's decision to accept or decline the formula offered by the center. This document must be kept on file for each infant and made available during reviews and/or audits. Please copy the *CACFP Infant Meal Pattern* to the back of the *Infant Meal Notification* prior to distributing to parents.

**Solid Infant Foods**—The decision to begin offering an infant solid foods should be made by the infant's doctor and parent/guardian. When the infant is 4 through 7 months old and developmentally ready for solid foods, those foods listed on the Infant Meal Pattern under *When Developmentally Ready* must be served to the infant. Infants 8 through 11 months are able to eat a wider variety of solid foods as listed on the Infant Meal Pattern. If a parent brings in solid foods for their infant the meal can be claimed **only** when the meal meets the Infant Meal Pattern requirements and the child care provider purchases and serves at least one of the food items according to the Infant Meal Pattern. A child care provider may puree/grind regular food to the appropriate consistency for infants. However, a child care center must follow food safety and sanitation procedures to prepare infant food. Commercial baby food may also be purchased. See *What's In a Meal* for further information on crediting foods for infants.

**Infant Meal Records**—Infant meal records, listing food items provided by both the center and the parents, must be maintained to document which meals are reimbursable. See *Guidance Memorandum 9C* for prototype *Infant Meal Record* forms.

A center must follow the Infant Meal Pattern until the infant reaches one year of age; at that time the infant can begin receiving meals that follow the attached *Meal Pattern Requirements – Children (Ages 1 through 12)*. Infants ages 8 through 11 months who are consuming all table foods, including whole fluid milk and/or adult cereals for breakfast, who have a signed medical statement on file saying these foods are appropriate for the infant, may be counted in the regular meal counts and production records. Infant meal records need not be completed for these infants. However, the complete meal pattern must be met for each meal that is to be claimed.

**The meal pattern for children ages 1 through 12 and older participants served in emergency shelters and at-risk afterschool care centers** contains specific components for each meal. Breakfast must include fluid milk, juice or fruit or vegetable, and a grain/bread item such as cereal, pancakes, or toast. Lunch/supper must include fluid milk, meat or meat alternate, vegetables and/or fruit (two or more), and grain/bread items such as pasta, rice, or buns. A snack must contain an item from each of two different food components (fluid milk, juice or fruit or vegetable, meat or meat alternate, grains/breads such as rice cakes, graham crackers, or tortillas). However, juice may not be served for snack when milk is served as the only other component.

Food production records must be completed for all meals served. These records are to be used to determine the amount of food to prepare and serve to meet the portion size requirements of the CACFP meal pattern. The production records should be used to plan food production and purchasing, and may help control food costs. See *Guidance Memorandum 9C* for prototype *Lunch/Supper* and *Breakfast/Snack Production Record* forms. These records must be readily available for review during a program evaluation to verify compliance with the meal pattern requirements. Emergency shelters are not required to maintain production records.

Commercially prepared, combination food items can only be credited to the CACFP meal pattern when the actual content (i.e., meat, bread, etc.) is known and documented. Examples of such food items are pizza, corn dogs, chicken nuggets, fish sticks, and ravioli. Acceptable documentation includes the actual Child Nutrition (CN) label marked on the product, or a product analysis sheet with a statement of the amount of cooked lean meat/meat alternate or other component provided by the food per serving. This must be signed by an official of the manufacturer. Documentation must be retained with your agency's CACFP records in order for these foods to count toward a reimbursable meal. In some cases (canned beef stew, chili, corned beef hash, etc.) the contribution a food item makes toward the CACFP meal pattern requirements(s) can be determined by reference to the USDA *Food Buying Guide for Child Nutrition Programs* (November 2001). Please refer to *What's in a Meal*, chapter III, pages 13 and 14, for more information, or contact your assigned consultant with specific questions.

Meals can be prepared at the center or purchased from a local school or other vendor. If meals are purchased the center is still responsible to make sure meals meet the meal pattern requirements. See *Guidance Memorandum 4* and *Guidance Memorandum 13C* for more information.

USDA regulations 7 CFR Part 15b **require** centers to provide food substitutions or make modifications in meals for children whose disabilities restrict their diets. A center must provide substitutions or make modifications for a child with a disability when that need is supported by a statement signed by a licensed physician. The physician's statement must identify:

- the child's disability;
- an explanation of why the disability restricts the child's diet;
- the major life activity affected by the disability;
- the food or foods to be omitted from the child's diet, and the food or choice of foods that must be substituted.

The attached prototype form, *Eating and Feeding Evaluation: Children with Special Needs*, may be used to obtain the required information from the physician. It also describes "disability" and "major life activity" in more detail.

The center **may** provide food substitutions, at their discretion, for individual children who do not have a disability, but who are medically certified as having a special medical or dietary need. Such determinations are only made on a case-by-case basis. This provision covers those children who have food intolerances or allergies but do not have life-threatening reactions (anaphylactic reactions) when exposed to the food(s) to which they have problems. The attached prototype form, *Eating and Feeding Evaluation: Children with Special Needs*, may also be used to obtain the required information for these children from a recognized medical authority.

The completed form or comparable information from a physician or recognized medical authority must be on file for any child with a restrictive diet that excludes a required component. This statement must indicate the food(s) to be omitted and foods that may be substituted in order to claim reimbursement for these meals. If a parent chooses to supply a particular item(s) for medical reasons and the signed statement is on file, the meal may still be claimed for reimbursement if the center supplies at least one required meal component.

# CACFP Meal Pattern Requirements—Children (Age 1 through 12)<sup>i</sup>

The meal must contain, at a minimum, each of the components listed in at least the amounts indicated for the specific age group in order to qualify for reimbursement.

	Age 1 & 2	Age 3, 4, & 5	Age 6 through 12 <sup>i</sup>
<b>BREAKFAST</b>			
1. Milk, fluid	1/2 cup	3/4 cup	1 cup
2. Juice, <sup>a</sup> fruit or vegetable <b>or</b> Fruit(s) or vegetable(s)	1/4 cup 1/4 cup	1/2 cup 1/2 cup	1/2 cup 1/2 cup
3. Grains/Breads: <sup>b</sup>			
Bread	1/2 slice	1/2 slice	1 slice
Cornbread, biscuits, rolls, muffins, etc <sup>b</sup>	1/2 serving	1/2 serving	1 serving
Cereal:			
Cold dry	1/4 cup or 1/3 oz <sup>c</sup>	1/3 cup or 1/2 oz <sup>c</sup>	3/4 cup or 1 oz <sup>c</sup>
Hot cooked	1/4 cup total	1/4 cup	1/2 cup
Cooked pasta or noodle products	1/4 cup	1/4 cup	1/2 cup
<b>LUNCH OR SUPPER</b>			
1. Milk	1/2 cup	3/4 cup	1 cup
2. Meat or meat alternate:			
Meat, poultry, fish, cheese	1 oz	1+1/2 oz	2 oz
Alternate protein products <sup>g</sup>	1 oz	1+1/2 oz	2 oz
Yogurt, plain or flavored, unsweetened or sweetened	4 oz or 1/2 cup	6 oz or 3/4 cup	8 oz or 1 cup
Egg	1/2 egg	3/4 egg	1 egg
Cooked dry beans or peas	1/4 Cup	3/8 cup	1/2 cup
Peanut butter or other nut or seed butter	2 Tbsp.	3 Tbsp.	4 Tbsp.
Peanuts or soynuts or tree nuts or seeds	1/2 oz = 50% <sup>d</sup>	3/4 oz = 50% <sup>d</sup>	1 oz = 50% <sup>d</sup>
3. Vegetable and/or fruit <sup>e</sup> (at least two)	1/4 cup total	1/2 cup total	3/4 cup total
4. Grains/Breads: <sup>b</sup>			
Bread	1/2 slice	1/2 slice	1 slice
Cornbread, biscuits, rolls, muffins, etc <sup>b</sup>	1/2 serving	1/2 serving	1 serving
Cereal, hot cooked	1/4 cup total	1/4 cup	1/2 cup
Cereal, cold, dry	1/4 cup or 1/3 oz <sup>c</sup>	1/3 cup or 1/2 oz <sup>c</sup>	3/4 cup or 1 oz <sup>c</sup>
Cooked pasta or noodle products	1/4 cup	1/4 cup	1/2 cup
<b>SNACK</b>			
Select two of the following four components:			
1. Milk	1/2 cup	1/2 cup	1 cup
2. Juice, a,f fruit or vegetable <b>or</b> Fruit(s) or vegetable(s)	1/2 cup 1/2 cup	1/2 cup 1/2 cup	3/4 cup 3/4 cup
3. Grains/Breads: <sup>b</sup>			
Bread	1/2 slice	1/2 slice	1 slice
Cornbread, biscuits, rolls, muffins, etc <sup>b</sup>	1/2 serving	1/2 serving	1 serving
Cereal:			
Cold dry	1/4 Cup or 1/3 oz <sup>c</sup>	1/3 cup or 1/2 oz <sup>c</sup>	3/4 cup or 1 oz <sup>c</sup>
Hot cooked	1/4 cup	1/4 cup	1/2 cup
4. Meat or meat alternate			
Meat, poultry, fish, cheese	1/2 oz	1/2 oz	1 oz
Alternate protein products <sup>g</sup>	1/2 oz	1/2 oz	1 oz
Egg, Large <sup>h</sup>	1/2 egg	1/2 egg	1/2 egg
Cooked dry beans or peas	1/8 Cup	1/8 cup	1/4 cup
Peanut butter or other nut or seed butter	1 Tbsp.	1 Tbsp.	2 Tbsp.
Peanuts or soynuts or tree nuts or seeds	1/2 oz	1/2 oz	1 oz
Yogurt, plain or flavored, unsweetened or sweetened	2 oz or 1/4 cup	2 oz or 1/4 cup	4 oz or 1/2 cup

a Must be full strength fruit or vegetable juice.

b Bread, pasta or noodle products, and cereal grains shall be whole grain or enriched, cornbread, biscuits, rolls, muffins, etc., shall be made with whole grain or enriched meal or flour.

c Either volume (cup) or weight (oz), whichever is less.

d No more than 50% of the requirement shall be met with tree nuts or seeds. Tree nuts and seeds shall be combined with another meat/meat alternate to fulfill the requirement. For purpose of determining combinations, 1 oz. Of nuts or seeds is equal to 1 oz. of cooked lean meat, poultry or fish.

e Serve 2 or more kinds of vegetable(s) and/or fruit(s). Full strength vegetable or fruit juice may be counted to meet not more than one-half of this requirement.

f Juice may not be served when milk is the only other component.

g Alternate protein products may be used as acceptable meat alternates if they meet the requirements on the following page.

h One-half egg meets the required minimum amount (one-ounce or less) of meat alternate.

i Youth ages 13 through 18 must be served minimum or larger portion sizes than those specified for ages 6 through 12.

## **Alternate Protein Products**

### **A. What are the criteria for alternate protein products used in the Child and Adult Care Food Program?**

1. An alternate protein product used in meals planned under the provisions in Sec. 226.20 must meet all of the criteria in this section.
2. An alternate protein product whether used alone or in combination with meat or meat alternate must meet the following criteria:
  - a. The alternate protein product must be processed so that some portion of the non-protein constituents of the food is removed. These alternate protein products must be safe and suitable edible products produced from plant or animal sources.
  - b. The biological quality of the protein in the alternate protein product must be at least 80 percent that of casein, determined by performing a Protein Digestibility Corrected Amino Acid Score (PDCAAS).
  - c. The alternate protein product must contain at least 18 percent protein by weight when fully hydrated or formulated. ("When hydrated or formulated" refers to a dry alternate protein product and the amount of water, fat, oil, colors, flavors or any other substances which have been added).
  - d. Manufacturers supplying an alternate protein product to participating schools or institutions must provide documentation that the product meets the criteria in paragraphs A.2. through c of this appendix.
  - e. Manufacturers should provide information on the percent protein contained in the dry alternate protein product and on an as prepared basis.
  - f. For an alternate protein product mix, manufacturers should provide information on:
    - (1) The amount by weight of dry alternate protein product in the package;
    - (2) Hydration instructions; and
    - (3) Instructions on how to combine the mix with meat or other meat alternates.

### **B. How are alternate protein products used in the Child and Adult Care Food Program?**

1. Schools, institutions, and service institutions may use alternate protein products to fulfill all or part of the meat/meat alternate component discussed in Sec. 226.20.
2. The following terms and conditions apply:
  - a. The alternate protein product may be used alone or in combination with other food ingredients. Examples of combination items are beef patties, beef crumbles, pizza topping, meat loaf, meat sauce, taco filling, burritos, and tuna salad.
  - b. Alternate protein products may be used in the dry form (nonhydrated), partially hydrated or fully hydrated form. The moisture content of the fully hydrated alternate protein product (if prepared from a dry concentrated form) must be such that the mixture will have a minimum of 18 percent protein by weight or equivalent amount for the dry or partially hydrated form (based on the level that would be provided if the product were fully hydrated).

### **C. How are commercially prepared products used in the Child and Adult Care Food Program?**

Schools, institutions, and service institutions may use a commercially prepared meat or meat alternate product combined with alternate protein products or use a commercially prepared product that contains only alternate protein products.

## CACFP Infant Meal Pattern Birth through 11 Months

To comply with the Child and Adult Care Food Program regulations, it is the responsibility of child care centers caring for infants to purchase all required meal components on the Infant Meal Pattern according to the different age groups in care. The Infant Meal Pattern lists the minimum amount of food to be offered to infants from birth through 11 months. The infant meal must contain each of the following components in at least the amounts indicated for the appropriate age group in order to qualify for reimbursement. Food within the meal pattern should be the texture and consistency appropriate for the development of the infant and may be served during a span of time consistent with the infant's eating habits; for example, the food items for lunch might be served at two feedings between 12 noon and 2 p.m. Solid food should be introduced gradually to infants when developmentally ready and instructed by the parent.

Items on the following meal chart with a “•” indicate the items are required and must be provided to the infant in order to claim reimbursement for that meal. Items listed under “When developmentally ready” are required only when the infant is developmentally ready to accept them.

Birth through 3 months	4 through 7 months	8 through 11 months
<b>Breakfast</b>		
<ul style="list-style-type: none"> <li>• 4–6 fl oz formula<sup>1</sup> or breast milk<sup>2,3</sup></li> </ul>	<ul style="list-style-type: none"> <li>• 4–8 fl oz formula<sup>1</sup> or breast milk<sup>2,3</sup></li> </ul> <p><u>When developmentally ready</u> 0–3 T infant cereal<sup>1</sup></p>	<ul style="list-style-type: none"> <li>• 6–8 fl oz formula<sup>1</sup> or breast milk<sup>2,3</sup> <b>and</b></li> <li>• 1–4 T fruit or vegetable or both <b>and</b></li> <li>• 2–4 T infant cereal<sup>1</sup></li> </ul>
<b>Lunch/Supper</b>		
<ul style="list-style-type: none"> <li>• 4–6 fl oz formula<sup>1</sup> or breast milk<sup>2,3</sup></li> </ul>	<ul style="list-style-type: none"> <li>• 4–8 fl oz formula<sup>1</sup> or breast milk<sup>2,3</sup></li> </ul> <p><u>When developmentally ready</u> 0–3 T infant cereal<sup>1</sup> <b>and</b> 0–3 T fruit or vegetable or both</p>	<ul style="list-style-type: none"> <li>• 6–8 fl oz formula<sup>1</sup> or breast milk<sup>2,3</sup> <b>and</b></li> <li>• 1–4 T fruit or vegetable or both <b>and</b></li> <li>• 2–4 T infant cereal<sup>1</sup> <b>or in place of infant cereal you may serve a meat/meat alternate</b> <ul style="list-style-type: none"> <li>○ 1–4 T meat, fish, poultry, egg yolk, cooked dry beans or peas; <b>or</b> ½–2 oz cheese; <b>or</b> 1–4 oz (volume) cottage cheese; <b>or</b> 1–4 oz (weight) cheese food, cheese spread</li> </ul> <b>or you may also serve</b> <ul style="list-style-type: none"> <li>○ both the infant cereal and meat/meat alternate</li> </ul> </li> </ul>
<b>Snack</b>		
<ul style="list-style-type: none"> <li>• 4–6 fl oz formula<sup>1</sup> or breast milk<sup>2,3</sup></li> </ul>	<ul style="list-style-type: none"> <li>• 4–6 fl oz formula<sup>1</sup> or breast milk<sup>2,3</sup></li> </ul>	<ul style="list-style-type: none"> <li>• 2–4 fl oz formula<sup>1</sup> or breast milk<sup>2,3</sup> or fruit juice<sup>4</sup></li> </ul> <p><u>When developmentally ready</u> 0–½ slice crusty bread<sup>5</sup> <b>or</b> 0–2 crackers<sup>5</sup></p>

<sup>1</sup> Infant formula and dry infant cereal must be iron-fortified.

<sup>2</sup> Breast milk or formula, or portions of both, may be served; however, it is recommended breast milk be served in place of formula from birth through 11 months.

<sup>3</sup> For some breastfed infants who regularly consume less than the minimum amount of breast milk per feeding, a serving of less than the minimum amount of breast milk may be offered with additional breast milk offered if the infant is still hungry.

<sup>4</sup> Fruit juice must be full-strength.

<sup>5</sup> A serving of this component must be made from whole-grain or enriched meal or flour.

### Infant Meal Notification

**Child Care Center Name:**

**Iron-fortified Infant Formula Offered by Center:**

All children enrolled in this center, including infants, are eligible for meals through the United States Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP). Child care centers in the program are reimbursed to help with the cost of serving nutritious meals to enrolled children. The meals must meet CACFP nutrition guidelines for children and infants. To meet CACFP requirements this center will provide formula and other foods for infants.

To help provide the best nutritional care for your infant, please complete the following information and return it to the center:

**Infant's First and Last Name:**

**Infant's Date of Birth:**

I understand that the child care center will supply the above iron-fortified infant formula for infants according to the CACFP requirements. **\*Note: Child care centers may request parents to supply clean, sanitized, and labeled bottles on a daily basis.**

**If you *formula-feed* your infant, place a check mark (✓) by only ONE of the following:**

- ☐ I prefer to have the child care center supply formula. **OR**
- ☐ I will supply formula for my infant.

**If you *breastfeed* your infant, place a check mark (✓) by only ONE of the following:**

- ☐ I will supply expressed (pumped) breastmilk. **OR**
- ☐ I will supply expressed (pumped) breastmilk and have the child care center supply formula to supplement as needed. **OR**
- ☐ I will supply expressed (pumped) breastmilk and will supply formula to supplement as needed.

I understand the child care center will supply infant cereal and other foods for infants 4 months and older as they are developmentally ready according to the CACFP requirements. Infant foods include fruits/vegetables, meat/meat alternates, enriched bread or snack crackers, and 100% full strength juice that are creditable to the USDA Infant Meal Pattern.

**Place a check mark (✓) by only ONE of the following:**

- ☐ I prefer to have the child care center supply infant cereal and infant foods. **OR**
- ☐ I will supply infant cereal and infant foods for my infant.

**\*\*This facility has not requested or required me to provide infant formula or food for my infant. I understand that I have the choice of having my infant participate in the CACFP.**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

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## Eating and Feeding Evaluation: Children with Special Needs

PART A		
Child's Name	Age	
Name of Facility		
Does the child <b>have a disability</b> ? If Yes, describe the major life activities affected by the disability.	Yes	No
Does the child have special nutritional or feeding needs? If Yes, complete Part B of this form and have it <b>signed by a licensed physician</b> .	Yes	No
<b>If the child is not disabled</b> , does the child have special nutritional or feeding needs? If Yes, complete Part B of this form and <b>have it signed by a recognized medical authority</b> .	Yes	No
If the child does not require special meals, the parent can sign at the bottom and return the form to the provider.		
PART B		
List any dietary restrictions or special diet.		
List any allergies or food intolerances to avoid.		
List foods to be substituted.		
List foods that need the following change in texture. If all foods need to be prepared in this manner, indicate "All."  Cut up or chopped into bite size pieces:  Finely ground:  Pureed:		
List any special equipment or utensils that are needed.		
Indicate any other comments about the child's eating or feeding patterns.		
Parent's Signature	Date:	
Parent's Printed Name and Phone Number	Date:	
Physician or Medical Authority's Signature	Date:	
Physician or Medical Authority's Printed Name and Phone Number		

Under Section 504 of the *Rehabilitation Act of 1973*, and the *Americans with Disabilities Act* (ADA) of 1990, a "person with a disability" means any person who has a physical or mental impairment which substantially limits one or more major life activities, has a record of such an impairment, or is regarded as having such an impairment. The term "physical or mental impairment" includes many diseases and conditions, a few of which may be:



- orthopedic, visual, speech, and hearing impairments;
- cerebral palsy;
- epilepsy;
- muscular dystrophy;
- multiple sclerosis;
- cancer;
- heart disease;
- metabolic diseases, such as diabetes or phenylketonuria (PKU);
- food anaphylaxis (severe food allergy);
- mental retardation;
- emotional illness;
- drug addiction and alcoholism;
- specific learning disabilities;
- HIV disease; and
- tuberculosis.

Major life activities covered by this definition include caring for one's self, eating, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

The term child with a "disability" under Part B of the *Individuals with Disabilities Education Act* (IDEA) means a child evaluated in accordance with IDEA as having one or more of the recognized thirteen disability categories and who, by reason thereof, needs special education and related services. The disabilities include:

- autism;
- deaf-blindness;
- deafness or other hearing impairments;
- mental retardation;
- orthopedic impairments;
- other health impairments due to chronic or acute health problems, such as asthma, diabetes, nephritis, sickle cell anemia, a heart condition, epilepsy, rheumatic fever, hemophilia, leukemia, lead poisoning, tuberculosis;
- emotional disturbance;
- specific learning disabilities;
- speech or language impairment;
- traumatic brain injury; and
- visual impairment; including blindness which adversely affects a child's educational performance, and
- multiple disabilities.

Attention deficit disorder or attention deficit hyperactivity disorder may fall under one of the thirteen categories. Classification depends upon the particular characteristics associated with the disorder and how the condition manifests itself in the student, which will determine the category.

### **In Cases of Food Allergy**

Generally, children with food allergies or intolerances do not have a disability as defined under either Section 504 of the Rehabilitation Act or Part B of IDEA, and the facility may, but is not required to, provide food substitutions for them.

However, when in the licensed physician's assessment, food allergies may result in severe, life-threatening (anaphylactic) reactions, the child's condition would meet the definition of "disability," and the substitutions prescribed by the licensed physician must be provided by the center.